

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Mr</i>	<i>6/10/01</i>	<i>9/6/01</i>
O.I.P.E. CLASSIFIER		<i>49</i>	<i>9/12/00</i>
FORMALITY REVIEW	<i>C.Y.C.</i>	<i>TC 530</i>	<i>10-13-00</i>
RESPONSE FORMALITY REVIEW	<i>MO</i>	<i>K95T</i>	<i>04/09/01</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

BEST AVAILABLE COPY

Claim	Date
1	<i>9/6/01</i>
2	<i>9/12/00</i>
3	<i>10-13-00</i>
4	<i>04/09/01</i>
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If more than 150 claims or 10 actions
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